



Policy: 3090
Procedure: 3090.01

Effective: 07/20/06
Replaces: 3100.24, 20, 22
25, 16 and
2307 and
2307.01
Dated: 07/07/00

Chapter: Medical Services
Rule: Special Needs and Services

Purpose:

The Arizona Department of Juvenile Corrections (ADJC) provides care for juveniles with special medical needs including those with chronic diseases or those that require regular care. Examples include juveniles that are developmentally or physically disabled, medically fragile, pregnant, or juveniles with serious communicable diseases or serious mental health needs.

Rules:

1. The **QUALITIFIED HEALTH CARE PROFESSIONAL (QHCP)** shall identify juveniles with special needs upon admission through the use of the nurse receiving screening form, intake medical history, and comprehensive physical examination.
2. A **PHYSICIAN OR MID-LEVEL PROVIDER** shall develop an individualized medical treatment plan within 7 days of admission for those juveniles identified. The **QHCP** shall list the juvenile's special needs on the master problem list in the health record.
3. A **PHYSICIAN OR MID-LEVEL PROVIDER** may include in the treatment plan:
 - a. Diet;
 - b. Exercise;
 - c. Medication or treatment as prescribed;
 - d. Type and frequency of laboratory and other diagnostic monitoring;
 - e. Frequency of follow up visits;
 - f. Treatment goals;
 - g. Required environmental or other modifications to programming including ADA compliance; and
 - h. Patient education.
4. The **PHYSICIAN, DENTIST, OR MID-LEVEL PROVIDER** shall write an order for special diets as required. The **QHCP** shall communicate the order for the special diet to the Food Service Department.
5. The **PHYSICIAN OR MID-LEVEL PROVIDER** shall see juveniles with chronic medical conditions at least monthly utilizing approved clinical protocols compliant with all Federal, State, and local regulations and consistent with community standards of care. **MENTAL HEALTH PERSONNEL INCLUDING THE PSYCHIATRIST** shall see juveniles with chronic mental health conditions on at least a monthly basis. The **QHCP** shall document all chronic care clinic visits in the juvenile's medical record and on the appropriate clinic flow sheets.
6. The **QHCP** shall communicate the juvenile's special needs to other personnel as needed to assure appropriate care, supervision, and activity. The **QHCP** shall clearly define program modifications and restrictions on the juvenile's Medical Record. The **QHCP** shall generate the Medical Restriction Notification.
7. The **PHYSICIAN OR MID-LEVEL PROVIDER** shall provide diagnostic services for juveniles with special needs beyond those offered at intake as clinically indicated.

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8. The **QHCP** shall provide pregnant juveniles comprehensive counseling and assistance, consistent with state and local laws, in accordance with their expressed desires regarding their pregnancy whether they elect to keep the child, use adoption services, or have an abortion. The **QHCP** shall:
 - a. Provide timely and appropriate prenatal, high risk obstetrical care when indicated and postpartum care to pregnant juveniles desiring to continue their pregnancy.
 - b. Develop a treatment plan to include:
 - i. Medical examinations; and
 - ii. Laboratory and diagnostic tests.
 - c. Advise on appropriate levels of activity, safety precautions, and nutritional guidance and counseling;
 - d. Maintain a list of all pregnancies and their outcomes;
 - e. Have a plan with the community hospital for the delivery; and
 - f. Document postpartum care in the juvenile's health record.
9. **QHCP** shall provide orthoses, prostheses, glasses, and other aids to impairment as clinically necessary upon order of the responsible physician, mid-level provider, or dentist.
10. Medical observation care (when available) shall be used for juveniles with an illness or diagnosis that requires daily monitoring, medication, and/or therapy requiring skilled nursing care who are not in need of hospitalization but in need of care greater than being on bed rest in the housing unit. The **PHYSICIAN, MID-LEVEL PROVIDER, OR DENTIST** may order a juvenile to be on observation status and to occupy an observation bed. A **CORRECTIONAL REGISTERED NURSE SUPERVISOR (CRNS) II** may order a juvenile to be observation status up to six hours.
 - a. The **PHYSICIAN, MID-LEVEL PROVIDER, DENTIST, OR CRNS II** shall include the following in his/her specific orders regarding patient care:
 - i. Admitting Diagnoses;
 - ii. Medication;
 - iii. Allergy information;
 - iv. Diet;
 - v. Activity restriction;
 - vi. Any diagnostic testing ordered;
 - vii. Frequency of vital sign monitoring; and
 - viii. Any other specific information.
 - b. The **QHCP** shall maintain a Medication Administration Record during the juvenile's stay;
 - c. The **QHCP** shall document routine nursing notes.
 - i. Frequency of nursing notes will be a minimum of every 4 hours and include vital signs.
 - d. **THE ADMITTING PROVIDER OR HIS/HER DESIGNEE** shall perform rounds on any patient in an observation bed every calendar day.
 - e. A **CORRECTIONAL REGISTERED NURSE** shall be on site at least once every 24 hours;
 - f. The **HEALTH AUTHORITY OR DESIGNEE** shall ensure that:
 - i. If a patient is in observation status for longer than 24 hours a physician's order is required;
 - ii. Observation status shall not be used for psychiatric care.
11. The **PHYSICIAN, MID-LEVEL PROVIDER, DENTIST, OR CRNS II** may order a juvenile to be on Shelter Housing in the regular housing unit. It provides a protected environment that does not require 24 hour nursing care. It is equivalent to home care for those not confined to a correctional facility. If necessary and available, a **QHCP** may choose to evaluate the patient in this setting or choose to have the housing unit employee or Security bring the juvenile to the Health Unit.

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12. The **PHYSICIAN, MID-LEVEL PROVIDER, OR DENTIST** shall order specialized ambulatory care and hospital services for all juveniles as clinically indicated for each juvenile. The **FACILITY SUPERINTENDENT AND MEDICAL PERSONNEL** shall make arrangements for secure transport, scheduling the appointment in accordance to Procedure 3100.22.
13. The **MULTIDISCIPLINARY TEAM** (MDT) shall address all juveniles with special needs to include medical, behavioral health, education, and security concerns.
14. The **MEDICAL DIRECTOR OR DESIGNEE** shall pursue agreements with each community hospital or specialty care provider that outline the terms of care to be provided.
15. The **QHCP** shall ensure that off-site specialized care is documented in the juvenile's medical record. The QHCP shall include the following information when available in the juvenile's record:
 - a. A summary of treatment given; and
 - b. Any follow up instructions or medications to be included in the juvenile's health record.
16. **MEDICAL AND BEHAVIOR HEALTH PERSONNEL** shall provide for the medical and mental health needs of terminally ill juveniles using the community standard of care as identified through the individual's treatment plan, including appropriate pain management. If the facility is not equipped to meet the needs of the juvenile, the **MEDICAL DIRECTOR** shall advocate for early release or transfer to another facility, hospital, or hospice that is able to meet his/her needs.

Effective Date:	Approved by Process Owner:	Review Date:	Reviewed By:
07/19/2006	Dr. Kellie Warren		